

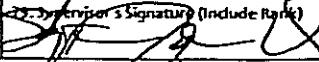
Exhibit B

Mon 192104 1140

Mon 192104 1100

16. Incident Type Case 7:07-cv-08190-KMK Document 1-3 Filed 09/10/2007 Page 2 of 22

ASSAULT 3

19. Incident Address (Street No., Street Name, Bldg. No., Apt. No.) NRHS - (Cont'd/14/11) 106 Hammond Rd		20. City, State, Zip (□ C □ NY, □ VI □ Other) THIELES, N.Y. 10584	21. Location Code (State Code) /
1	R 120.00	1 A M: 3 C	23. No. of Victims /
2			24. No. of Suspects /
3			25. Victim also complainant (□ Y □ N) /
VI [REDACTED]			
EOI: MIRANDA, MARCOS 5-1-50 7 Dawson Rd. THIELES N.Y. 10584			
PI: Andrae, RALPH 5-31-50 106 Hammond Rd			
27. Date of Birth [REDACTED] 28. Age 17 29. Sex M <input checked="" type="checkbox"/> F <input type="checkbox"/> U			
30. Race <input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk.			
31. Ethnic <input checked="" type="checkbox"/> Hispanic <input type="checkbox"/> Unk. <input type="checkbox"/> Non-Hispanic			
32. Handicap <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
33. Residence Status <input type="checkbox"/> Temp. Res. - Foreign Nat. <input type="checkbox"/> Resident <input type="checkbox"/> Tourist <input type="checkbox"/> Student <input type="checkbox"/> Other <input type="checkbox"/> Commuter <input type="checkbox"/> Military <input type="checkbox"/> Homeless <input type="checkbox"/> Unk			
34. Type/No <input type="checkbox"/> Angle		35. Name (Last, First, Middle) [REDACTED]	
36. Alias/Nickname/Maiden Name (Last, First, Middle) [REDACTED]			
37. Apparent Condition <input type="checkbox"/> Impaired Drug <input type="checkbox"/> Mental Dis. <input type="checkbox"/> Unk. <input type="checkbox"/> Impaired Alco <input type="checkbox"/> Inj / Ill <input checked="" type="checkbox"/> App Norm			
38. Address (Street No., Street Name, Bldg. No., Apt. No., City, State, Zip) [REDACTED]			
39. Phone No. <input checked="" type="checkbox"/> Home <input type="checkbox"/> Work			
40. Social Security No. [REDACTED] 20			
41. Date of Birth [REDACTED]		42. Age 16 43. Sex M <input checked="" type="checkbox"/> F <input type="checkbox"/> U	
44. Race <input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk.		45. Ethnic <input type="checkbox"/> Hispanic <input type="checkbox"/> Unk. <input checked="" type="checkbox"/> Non-Hispanic	
46. Skin <input checked="" type="checkbox"/> Light <input type="checkbox"/> Dark <input type="checkbox"/> Unk. <input type="checkbox"/> Medium <input type="checkbox"/> Other		47. Occupation STABDR	
48. Height 5'4" 49. Weight 105 50. Hair Bk 51. Eyes B20		52. Glasses <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Contacts <input type="checkbox"/> No	
53. Build <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Large <input type="checkbox"/> Medium		54. Employer/School NRHS	
55. Address 106 Hammond Rd			
56. Scars/ Marks/Tattoos (Describe) 57. Misc.			
58. Vehicle Status TABLE W			
59. Vehicle Status TABLE W		60. License Plate No. Full <input type="checkbox"/> Partial <input checked="" type="checkbox"/> 61. State 62. Exp. Yr. 63. Plate Type 64. Value	
65. Veh. Yr.		66. Make 67. Model 68. Style 69. VIN	
70. Color(s)		71. Towed By: To: 72. Vehicle Notes	
73. PI (School Administrator) STATES AT ABOVE TIME, VI & SI WERE INVOLVED IN A PHYSICAL ALTERCATION. DURING ALTERCATION SI KICKED VI IN HER NOSE CAUSING EXTREME SWELLING, DIS-COLORING AND BLEEDING AND FISHER BREAKING. FIGHT WAS BROKEN UP BY TEACHERS AND VICTIM WAS TAKEN TO THE SCHOOL NURSE. VICTIM WAS THEN TAKEN TO NYACK HOSPITAL BY PARENTS. SI WAS PLACED UNDER ARREST FOR ABOVE CHARGE.			
74. Inquiries (Check all that apply) <input type="checkbox"/> DMV <input type="checkbox"/> Want/Warrant <input type="checkbox"/> Crim. History <input type="checkbox"/> Stolen Property		75. NYSPIN Message No. 76. Complainant Signature 	
77. Reporting Officer Signature (Include Rank) 		78. ID No. 304 79. Supervisor's Signature (Include Rank) 	
80. ID No. 75		81. Status Open <input checked="" type="checkbox"/> Closed (If Closed, check box below) <input type="checkbox"/> Unfounded <input type="checkbox"/> Arrest <input type="checkbox"/> Pros. Declined <input type="checkbox"/> Warrant Advised <input type="checkbox"/> CBI <input type="checkbox"/> Juv. No Custody <input type="checkbox"/> Arrest-Juv. <input type="checkbox"/> Offender-Dead <input type="checkbox"/> Extrad. Declin. <input type="checkbox"/> Unknown	
82. Status Date 1/6/12 83. Notified/TOT			

7. Report Day 10/19/07	8. Date Mo. Day	9. Report Time 18:45	10. Day Mo. Day	11. Date Mo. Day Year	12. Time Mo. Day Year	13. Day Mo. Day	14. Date Mo. Day	15. Time Mo. Day								
16. Incident Type Assault				17. Business Name North Rockland High School		18. Weapon(s)										
19. Incident Address (Street No., Street Name, Bldg. No., Apt. No.) 100 Main Street, Rockland				20. City, State, Zip (□ C □ P □ V) Theresa NY 10584		21. Location Code 445										
1 100 Main Street, Rockland 2 3				Assault 3rd		22. No. of Victims 1										
						23. No. of Suspects 1										
						24. Na. of Suspects 88										
						25. Victim also complainant: □ Y □ N										
VI	Juvenile						26. Victim also complainant: □ Y □ N									
CO							27. Business RESIDENCE									
							28. Business RESIDENCE									
							29. Business RESIDENCE									
							30. Business RESIDENCE									
27. Date of Birth Mo. Day Yr.	28. Age	29. Sex □ M □ F □ U	30. Race □ White □ Black □ Other □ Indian □ Asian □ Unk.	31. Ethnic □ Hispanic □ Unk. □ Non-Hispanic	32. Handicap □ Yes □ No	33. Residence Status □ Temp. Res. □ Foreign Nat. □ Resident □ Tourist □ Student □ Other □ Commuter □ Military □ Homeless □ Unk	34. Type/No TABLE O			35. Name (Last, First, Middle) Juvenile	36. Alias/Nickname/Maiden Name (Last, First, Middle)	37. Apparent Condition □ Impaired Drugs □ Mental Dls □ Unk. □ Impaired Alco □ Inj / Ill □ App Norn	K. 2			
38. Address (Street No., Street Name, Bldg. No., Apt. No., City, State, Zip)	39. Phone No. □ Home □ Work			40. Social Security No. 30												
41. Date of Birth Mo. Day Yr.	42. Age	43. Sex □ M □ F □ U	44. Race □ White □ Black □ Other □ Indian □ Asian □ Unk.	45. Ethnic □ Hispanic □ Unk. □ Non-Hispanic	46. Skin □ Light □ Dark □ Unk. □ Medium □ Other	47. Occupation TABLE P				M. —						
48. Height ft. in.	49. Weight TABLE O	50. Hair TABLE R	51. Eyes TABLE R	52. Glasses □ Yes □ Contacts □ No	53. Build □ Small □ Large □ Medium	54. Employer/School	55. Address			N. —						
56. Scars/ Marks /Tattoos (Describe)				57. Misc.					1 2 3 4 5 6 7 8 9 10 11 12 13 Total							
58. TABLE S	59. Vehicle Status TABLE W	60. License Plate No Full <input type="checkbox"/> Partial <input type="checkbox"/>		61. State	62. Exp. Yr.	63. Plate Type	64. Value	65. Veh. Yr.			66. Make	67. Model	68. Style	69. VIN.		
70. Color(s)	71. Towed By: To:		72. Vehicle Notes													
<p>At the above time and place, The victim was attempting to leave the Classroom, when the Suspect got up from his Chair and shoved her. The Suspect grabbed the victim by her arms and neck and shoved her again causing her to fall and hitting her head on the edge of the black board. TOT YOUTH BUREAU for further investigation</p>																
74. Inquiries (Check all that apply) □ DMV □ Want/Warrant □ Crim. History □ Stolen Property □ Scofflaw □ Other				75. NYSPIN Message No. 10/19/07			76. Complaints Received 10/19/07			77. Reporting Officer Signature (Include Rank) P.O. Cd. Chepo			78. ID No. 317	79. Supervisor's Signature (Include Rank) J. J. J.	80. ID No. 75	84. Page 2 2 Pages
81. Status □ Open □ Closed (If Closed, check box below) □ Vicl. Refused to Coop. □ Arrest □ CSI □ Juv. -No Custody				82. Status Date 02/03/07			83. Modified/TOT 02/03/07 Youth Bureau									
84. Page 2 2 Pages																

Victim

7/24/89 (14 yrs old)
H/F

Suspect

08-04-88 (67 yrs)
- H/m

1
2
3
4
5
6
7
8
9
10
11
12
13

Total

Inquiries (Check all that apply)		11. NYSPIN Message No.	12.	20.
DMV	<input type="checkbox"/> Want/Warrant	Scotflaw		2
Crim. History	<input type="checkbox"/> Stolen Property	<input type="checkbox"/> Other		Page
Reporting Officer Signature (Include Rank)		14. ID No.	15. Supervisor's Signature (Include Rank)	33
<i>John C. Jones</i>		37	<i>John D. Patterson</i>	Pages
Case Status		18. Status Date		19. Notified/TOT
Vict. Refused to Coop.		<input type="checkbox"/> Open	<input type="checkbox"/> Closed (If Closed, check box below)	<input type="checkbox"/> Unfounded
		<input type="checkbox"/> Arrest	<input type="checkbox"/> Pros. Declined	<input type="checkbox"/> Warrant Advised
		<input type="checkbox"/> Arrest - Juv.	<input type="checkbox"/> Offender Dead	<input type="checkbox"/> Extrad. Declin
		<input type="checkbox"/> Unknown		
215 b1				
B use cover sheet				

7. Report Day
WED8. Date
06/26/049. Report Time
134510. Day
WED11. Date
06/26/0412. Time
134513. Day
THU14. Date
06/27/0415. Time
0000

Case 7:07 cv 08190-KMK Document 1-3

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16. Incident Type
CRIM TRESPASS17. Business Name
NORTH ROCKLAND HIGH SCHOOL18. Weapon(s)
THEFT NY

19. Incident Address (Street No., Street Name, Bldg. No., Apt. No.)

20. City, State, Zip C T V21. Location Code
4455

5707 22 14010 B B M 3 CRIMINAL TRESPASS 3 1 1

2 22 26010 1 A M 0 C ENDANGERING THE WELFARE OF A CO 1 1

3 22 24010 3 0 V 2 C HARASSMENT 2 1 1

22. No. of Victims

A

23. No. of Suspects

B

24. No. of Officers

C

25. Victim also complainant. Y N

D

26. Officer Name
Sgt. ANDREANO, K. 104

5/18/04 North Rockland High School

BUSINESS
RESIDENCE 3300

CO RUDOLPH, BARBARA

5/15/04 North Rock High School

BUSINESS 3300
RESIDENCE

CO HERSKA, TRACY

6/4/05 North Rock High School

BUSINESS 3300
RESIDENCE

VIC [REDACTED]

[REDACTED] 10927

BUSINESS

27. Date of Birth
Mo. Day Yr.28. Age
29. Sex
 M F
 U30. Race
 White Black Other
 Indian Asian Unk.31. Ethnic
 Hispanic Unk.
 Non-Hispanic32. Handicap
 Yes
 No33. Residence Status
 Temp. Res. - Foreign Nat. Resident Tourist Student Other Commuter Military Homeless Unk.34. Type/No
TABLE O35. Name (Last, First, Middle)
[REDACTED]

36. Alias/Nickname/Maiden Name (Last, First, Middle)

37. Apparent Condition
 Impaired Drugs Mental Dis Unk. Impaired Alco Inj/Ill App Norm38. Address (Street No., Street Name, Bldg. No., Apt. No., City, State, Zip)
[REDACTED]39. Phone No
[REDACTED] Home Work40. Social Security No.
[REDACTED]41. Date of Birth
[REDACTED]42. Age
2743. Sex
 M F
 U44. Race
 White Black Other Indian Asian Unk.45. Ethnic
 Hispanic Unk.
 Non-Hispanic46. Skin
 Light Dark Unk. Medium Other47. Occupation
TABLE P48. Height
5' in 849. Weight
16550. Hair
BROWN51. Eyes
Hazel52. Glasses
 Yes Contacts No53. Build
 Small Large Medium54. Employer/School
—55. Address
[REDACTED]

56. Scars/ Marks/Tattoos (Describe)

57. Misc.

58. Identification
TABLES TABLET TABLE U TABLE V59. Vehicle Status
TABLE W60. License Plate No
Full Partial 61. State
62. Exp. Yr.
63. Plate Type
64. Value

Total

65. Veh. Yr.

66. Make
67. Model
68. Style
69. VIN.

70. Color(s)

71. Towed By:
To:

72. Vehicle Notes

73. Above Complainants STATE Above Subject WAS INCAPACITATED

CURSING AT A STUDENT (CO) STATE Subject then got up & STARTED

WALKING OUT OF BLDG, YELLING CURSES. Subject WAS TOLD TO STOP BY CO

Subject THEN RAN OUT OF BLDG TOWARD MARIAN SHRINE

Subject IS NOT A STUDENT AT School & DID NOT HAVE PERMISSION TO

BE ON SCHOOL GROUNDS

Subject ARRESTED FOR CRIMINAL TRESPASS, ENDANGERING THE WELFARE OF A

CO AND HARASSMENT CHARGES ALSO FILED FROM (2).

74. Inquiries (Check all that apply)

75. NYSPIN Message No.

76. Complainant's Signature
RICHARD A. [Signature] DMV Want/Warrant Scofflaw Stolen Property Other Crim. History77. Reporting Officer Signature (Include Rank)
Allen S. [Signature]78. ID No.
30279. Supervisor's Signature (Include Rank)
B. [Signature]80. ID No.
7781. Status
 Open Closed (If Closed, check box below)82. Status Date
06/26/04 Arrest Unfounded Vicl. Refused to Coop.83. Notified/TOT
06/26/04 CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown Vicl. Refused to Coop. Arrest - Juv. Offender Dead Etrad. Declin Unknown CBI Juv. - No Custody Arrest - Juv. Offender Dead Etrad. Declin Unknown

17. Assau		18. Street No., Street Name, Bldg. No., Apt. No.		19. Incident Address		20. City, State, Zip (C P.O. V)		21. Location Code					
100 Hammond Rd.				Thiells NY 10984		4457		22. No. of Victims					
1399 PL 100 00 2 A M 3 C		A M S 00 7						23. No. of Suspects					
2								24. No. of Suspects					
3								25. Victim/Offender Relationship (P.D. 100)					
VI		JUVENILE - See Supplemental						26. Victim/Offender Relationship (P.D. 100)					
PR		[REDACTED]						27. BUSINESS RESIDENCE					
								28. BUSINESS RESIDENCE					
								29. BUSINESS RESIDENCE					
								30. BUSINESS RESIDENCE					
27. Date of Birth		28. Age		29. Sex		30. Race		31. Ethnic					
Mo. Day	Yr.			<input type="checkbox"/> M	<input type="checkbox"/> F	<input type="checkbox"/> White	<input type="checkbox"/> Black	<input type="checkbox"/> Other	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Unk.			
				<input type="checkbox"/> U		<input type="checkbox"/> Indian	<input type="checkbox"/> Asian	<input type="checkbox"/> Unk.	<input type="checkbox"/> Non-Hispanic				
34. Type/No		35. Name (Last, First, Middle)		36. Alias/Nickname/Maiden Name (Last, First, Middle)		37. Apparent Condition		38. Residence Status		39. Temp. Res. - Foreign Nat.			
TABLE O		See Supplemental				<input type="checkbox"/> Impaired Drugs		<input type="checkbox"/> Resident		<input type="checkbox"/> Tourist			
						<input type="checkbox"/> Impaired Alco		<input type="checkbox"/> Commuter		<input type="checkbox"/> Student			
								<input type="checkbox"/> Military		<input type="checkbox"/> Other			
								<input type="checkbox"/> Homeless		<input type="checkbox"/> Unk.			
40. Social Security No.		41. Date of Birth		42. Age		43. Sex		44. Race		45. Ethnic			
		Mo. Day	Yr.			<input type="checkbox"/> M	<input type="checkbox"/> F	<input type="checkbox"/> White	<input type="checkbox"/> Black	<input type="checkbox"/> Other	<input type="checkbox"/> Hispanic		
						<input type="checkbox"/> U		<input type="checkbox"/> Indian	<input type="checkbox"/> Asian	<input type="checkbox"/> Unk.	<input type="checkbox"/> Non-Hispanic		
46. Skin		47. Occupation		48. Height		49. Weight		50. Hair		51. Eyes			
<input type="checkbox"/> Light		TABLE P		ft. in.		TABLE Q	TABLE R						
<input type="checkbox"/> Dark													
<input type="checkbox"/> Medium													
<input type="checkbox"/> Other													
52. Glasses		53. Build		54. Employer/School		55. Address		56. Scars/Marks/Tattoos (Describe)		57. Misc.			
<input type="checkbox"/> Yes		<input type="checkbox"/> Small		TABLE S		TABLE T							
<input type="checkbox"/> No		<input type="checkbox"/> Large											
		<input type="checkbox"/> Medium											
58. VIN.		59. Vehicle Status		60. License Plate No		61. State		62. Exp. Yr.		63. Plate Type		64. Value	
TABLE W		<input type="checkbox"/> Full				<input type="checkbox"/> Partial						Total	
65. Veh. Yr.		66. Make		67. Model		68. Style		69. VIN.					
70. Color(s)		71. Towed By:		72. Vehicle Notes									
73. Inquiries (Check all that apply)		74. NYSPIN Message No.		75. Complainant Signature		76. Supervisor's Signature (Include Rank)		77. Reporting Officer Signature (Include Rank)		78. ID No.		79. Supervisor's Signature (Include Rank)	
<input type="checkbox"/> DMV		<input type="checkbox"/> Warr/Warrant		<input type="checkbox"/> Scofflaw		<input type="checkbox"/> Other				207			
<input type="checkbox"/> Crim. History		<input type="checkbox"/> Stolen Property											
81. Status		<input type="checkbox"/> Open		<input type="checkbox"/> Closed (If Closed, check box below)		<input type="checkbox"/> Unfounded		82. Status Date		83. Notified/TOT		84. ID No.	
82. Vic. Refused to Coop.		<input type="checkbox"/>		<input type="checkbox"/> Arrest		<input type="checkbox"/> Pros. Declined		<input type="checkbox"/> Warrant Advised		5/18/04		90	
83. CBI		<input type="checkbox"/> Juv. - No Custody		<input type="checkbox"/> Arrest-Juv.		<input type="checkbox"/> Offender Dead		<input type="checkbox"/> Extrad. Declin		<input type="checkbox"/> Unknown			

3. Narrative (Indicate the following information)

U-2 - [REDACTED]

DOB - 10/17/08

S-1 [REDACTED]

- DOB - 15yrs male
Hispanic

S-2 [REDACTED]

DOB - 15yrs male
Hispanic**JUVENILE**1
2
3
4
5
6
7
8
9
10
11
12
13

Total

2. Inquiries (Check all that apply)			11. NYSPIN Message No.	12.	20 Page 23 Pages
<input checked="" type="checkbox"/> DMV	<input type="checkbox"/> Wapt/Warrant	<input type="checkbox"/> Scotlaw			
3. Reporting Office Signature (Indicate Rank)			14. ID No. 207	15. Supervisor's Signature (Indicate Rank)	16. ID No.
<i>PO David H</i>					
7. Case Status <input type="checkbox"/> Open <input type="checkbox"/> Closed (If Closed, check box below) <input type="checkbox"/> Unfounded <input checked="" type="checkbox"/> VFCR-Refused to Coop. <input type="checkbox"/> Arrest <input type="checkbox"/> Pros. Declined <input type="checkbox"/> Warrant-Advised <input checked="" type="checkbox"/> TCR <input type="checkbox"/> Juv. No Custody <input type="checkbox"/> Arrest-Juv. <input type="checkbox"/> Offender Dead <input type="checkbox"/> Extrad. Decln <input type="checkbox"/> Unknown			18. Status Date Mo. 1 Day 164 Yrs		19. Notified TO/T <i>Youth Officer</i>
					B use cover sheet

16. Incident Type

HARMONIZING 20

17. Business Name

18. Weapon(s)

STEAK KNIFE

A 11

19. Incident Address (Street No., Street Name, Bldg. No., Apt. No.)

106 HARMONIZING RD

20. City, State, Zip (□ C □ E □ V)

ROCHELS NY 10974

21. Location Code

TILE/CEMET

B. 7

1	PL 12014	1	A	M	2	C	HARMONIZING 20	1	1	23. No. of Victims	C
2										24. No. of Suspects	D 48
3										25. Victim also complainant - B. 1	E. 1

CO	1	5.								BUSINESS	F. 1
V1		JUVENILE								BUSINESS	G. 1
OT1		JUVENILE								BUSINESS	H. 1
OT2		JUVENILE								BUSINESS	I. 4
RESIDENCE										RESIDENCE	

27. Date of Birth	28. Age	29. Sex	30. Race	31. Ethnic	32. Handicap	33. Residence Status	Temp. Res. - Foreign Nat.
Mo. Day	Yr	—	□ M □ F □ U	□ White □ Black □ Other □ Indian □ Asian □ Unk.	□ Yes □ No □ Non-Hispanic	□ Resident □ Tourist □ Student □ Other □ Commuter □ Military □ Homeless □ Unk.	I. 00

34. Type/No	35. Name (Last, First, Middle)	36. Alias/Nickname/Maiden Name (Last, First, Middle)	37. Apparent Condition
TABLE O			□ Impaired Drugs □ Mental Dis. □ Unk. □ Impaired Alco □ Inj / Ill □ App Norm

38. Address (Street No., Street Name, Bldg. No., Apt. No., City, State, Zip)	39. Phone No.	40. Social Security No.
	□ Home □ Work	

41. Date of Birth	42. Age	43. Sex	44. Race	45. Ethnic	46. Skin	47. Occupation
	17	□ M □ F □ U	□ White □ Black □ Other □ Indian □ Asian □ Unk.	□ Hispanic □ Unk. □ Non-Hispanic	□ Light □ Dark □ Unk. □ Medium □ Other	TABLE P

48. Height	49. Weight	50. Hair	51. Eyes	52. Glasses	53. Build	54. Employer/School	55. Address
H. 6	150D	350D	PEEK	TYRN	□ Yes □ Contacts □ No	□ Small □ Large □ Medium	

56. Scars/ Marks/Tattoos (Describe)	57. Misc.

TABLE S	TABLE T	TABLE U	TABLE V

59. Vehicle Status	60. License Plate No	Full □ Partial □	61. State	62. Exp. Yr.	63. Plate Type	64. Value	Total
TABLE W							

65. Veh. Yr.	66. Make	67. Model	68. Style	69. VIN.

70. Color(s)	71. Towed By: To:	72. Vehicle Notes

73. THE Complainant STATES THAT HE ARRIVED AT THE AFOREMENTIONED LOCATION TO PICK UP V1 AND OT1. V1 EXPLAINED TO CO THAT S1 THREATENED TO STAR HIM WITH A KNIFE. CO STATES THAT HE QUESTIONED S1 ABOUT THE INCIDENT AND HE ADMITTED TO SAYING THE STATEMENT V1 TOLD CO ABOUT THE KNIFE AND THE LOCATION OF THE KNIFE. CO STATES THAT HE SAW S1 REACH INTO THE GARBAGE CAN AND PULLED OUT A BLACK HANDLE STEAK KNIFE AND BROKE IT IN HALF. THE CO STATES THAT HE THEN THREW IT BACK INTO THE GARBAGE CAN. SECURITY ARRIVED AND DETERMINED TO FOR QUESTIONING ABOUT THE INCIDENT AND THE CO STATES A FIGHT STARTED BETWEEN V1 AND OT2. S1 LEFT THE AREA. CO DECLINED PROSECUTION FOR NOW.

74. Inquiries (Check all that apply)	75. NYSPIN Message No.	76. Complaint Number
□ DMV □ Wart Warrant □ Scotlaw □ Crim. History □ Stolen Property □ Other		

77. Reporting Officer Signature (Include Rank)	78. ID No.	79. Supervisor's Signature (Include Rank)	80. ID No.
John Melendez	217	John Correa	#311

81. Status	□ Open □ Closed (If Closed, check box below)	□ Unfounded	82. Status Date	83. Notified/TOT
□ Vict. Refused to Coop.	□ Arrest	□ Pros. Declined	09/23/04	YOUTH DIVISION

84. CBI Status □ Juv. - No Custody □ Arrest - Juv. □ Offender Dead □ Extrad. Declin. □ Unknown

85. Page 3 of 3

9. Narrative

JUVENILE WITNESSESW₁ -

[REDACTED]

(REDACTED)

W₁ - [REDACTED]

- SAW THE SUSPECT'S KNIFE,
- HEARD THE WORDS EXCHANGED BETWEEN THE VICTIM AND THE SUSPECT,
- SAW THE SUSPECT THROW THE KNIFE IN THE GARBAGE CAN

W₂ -

[REDACTED]

[REDACTED]

- SAW THE SUSPECT WITH A KNIFE
- SAW THE SUSPECT THROW THE KNIFE IN THE GARBAGE CAN AFTER BREAKING THE KNIFE,
- GAVE DESCRIPTION OF THE KNIFE

W₃ -

[REDACTED]

[REDACTED]

- KNOWS THE SUSPECT AS [REDACTED]
- SAW THE SUSPECT THROW THE KNIFE IN THE GARBAGE CAN.

10. Inquiries (Check all that apply)

DMV Warr/Warrant Scofflaw

Crim.History Stolen Property Other

11. NYSPIN Message No.

12.

13. Reporting Officer Signature (Include Rank)

14. ID No.

15. Supervisor's Signature (Include Rank)

16. ID No.

17. Case Status

Open Closed (If Closed, check box below)

Unfounded Warrant Advised

Vict. Refused to Coop. Arrest Pros. Declined

Dis. Amst Arrest - less Other/Other

Entered Record Unknown

18. Status Date

19. Noticed/TOT

82

Page 3

Total

16. Incident Type

Case 7.07-cv-08190-KMK Document 1-3 Filed 09/19/2007 Page 11 of 22

17. Business Name

18. Weapon(s)

19. Incident Address (Street No., Street Name, Bldg. No., Apt. No.)

BASKETBALL CT. - NRHS 106 Hammond Rd

20. City, State, Zip (□ C □ ST □ V) THIELELS NY 10984

21. Location Code
Sgt. Keeley

B

ASSAULT 3°

1 PL 20.00 1 A M S C ASSAULT 3°

23. No. of Victims

C

24. No. of Suspects

D

OC

26. Victim also complainant. BY 1300

E

VI JUVENILE

BUSINESS

OT [REDACTED] (MOTHER)

RESIDENCE

PR. P.O. R. SPATTA - HTPD - NRHS-SRO

BUSINESS

RESIDENCE

G

H

27. Date of Birth 02/10/88 28. Age 15 29. Sex M 30. Race White Black Other Indian Asian Unk. 31. Ethnic Hispanic Unk. Non-Hispanic 32. Handicap Yes No 33. Residence Status Temp. Res. - Foreign Nat. Resident Tourist Student Other Commuter Military Homeless Unk

J

34. Type/No TABLE A 35. Name (Last, First, Middle) A 36. Alias/Nickname/Maiden Name (Last, First, Middle) 37. Impaired Condition Impaired Drugs Mental Dis. Unk. Impaired Alco Inj / Ill App Norm

K

38. Address (Street No., Street Name, Bldg. No., Apt. No., City, State, Zip) 39. Phone No. 40. Social Security No.

L

41. Date of Birth 42. Age 17 43. Sex M 44. Race White Black Other Indian Asian Unk. 45. Ethnic Hispanic Unk. Non-Hispanic 46. Skin Light Dark Unk. Medium Other 47. Occupation STUDENT

M

48. Height 5'9 49. Weight 140 50. Hair BLK 51. Eyes BLK 52. Glasses Yes Contacts No 53. Build Small Large Medium 54. Employer/School N.R.H.S. 55. Address 106 Hammond

N

56. Scars/ Marks/ Tattoos (Describe) 57. Misc.

O

58. Vehicle Status TABLE W 60. License Plate No Full Partial 61. State 62. Exp. Yr. 63. Plate Type 64. Value Total

P

65. Veh. Yr. 66. Make 67. Model 68. Style 69. VIN.

Q

70. Color(s) 71. Towed By: To: 72. Vehicle Notes

R

73. Juvenile Victim was Playing Basketball During His Lunch Period AT NRHS after [REDACTED] punched Victim on the right side of his face causing Victim to fall hitting his head. Victim was rendered unconscious for a few moments. Victim was taken to Nyack Hospital via H.V.A.C. Victim's right side of face was dislodged and swollen.

S

Victims mother did go with Victim to hospital.

T

74. Inquiries (Check all that apply) DMV Warrant/Warrant Scofflaw Other 75. NYSPIN Message No. 76. Complainant Signature P.O. Keeley

U

77. Reporting Officer Signature-Bridge Rank KO. Keeley 78. ID No. 304 79. Supervisor's Signature (Include Rank) Sgt. Keeley 80. ID No. 85

V

81. Status Open Closed (If Closed, check box below) Unfounded Vic. Refused to Coop. Arrest Pros. Declined Warrant Advised CBI Juv-No Custody Arrest-Juv. Offender Dead Extrad. Declin. Unknown 82. Status Date 10/26/04 83. Monitor/Officer Sgt. Keeley 84. Page 2 of 2 Pages

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10. **9. Narrative (Indicate Block No. in left margin)**

5 Victim:

12.8.88

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Total

10. Inquiries (Check all that apply)				11. NYSPIN Message No.	12.	13. Reporting Officer Signature (Include Rank)		14. ID No.	15. Supervisor's Signature (Include Rank)	16. ID No.	20. <i>2</i> Pages <i>2</i> Pages <i>2</i>
<input type="checkbox"/> DMV	<input type="checkbox"/> Want/Warrant	<input type="checkbox"/> Scofflaw	<input type="checkbox"/> Crim. History	<input type="checkbox"/> Stolen Property	<input type="checkbox"/> Other						
<i>TC</i>				<i>301</i>		<i>Sgt J. Klecker</i>				<i>85</i>	
17. Case Status				18. Status Date	19. Notified/TOT	21. <i>B</i> use cover sheet					
<input type="checkbox"/> Open <input type="checkbox"/> Dismissed (If closed, check box below) <input type="checkbox"/> Unfounded <input type="checkbox"/> VIIC Refused to Coop. <input checked="" type="checkbox"/> Arrest <input type="checkbox"/> Pros. Declined <input type="checkbox"/> Warrant Advised <input type="checkbox"/> CBI <input type="checkbox"/> Juv. -No Custody <input type="checkbox"/> Arrest-Juv. <input type="checkbox"/> Offender Dead <input type="checkbox"/> Extrad. Decln <input type="checkbox"/> Unknown				Mo. <i>10</i>	Day <i>26</i>	Yr <i>bcr</i>					

MON 10/04/04 07:08:00

PRI 10/3 07:10:35

FRI 10/3 07:11:00

16. Incident Type

Case 7:07-cv-08190-KMK

17. Business Name

Document 1-3

18. Warrant(s) Filed 09/19/2007 Page 13 of 22

19. Incident Address (Street No., Street Name, Bldg. No., Apt. No.)

NRHS - 106 Hammond Rd

20. City, State, Zip (C V)

THIEULS NY 10584

21. Location Code

THE BLDG

22. Off. No.

Law

Section

Sub

Date

Def.

Time

Inc.

Off.

23. Off. No.

Law

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Date

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25. Person Type: Complainant Other Person Interviewed Person Identified Victim Witness Victim Identified Victim Unknown Victim Also Complainant Yes No

Type/No.

Name (Last, First, Middle)

Date of Birth

Street No., Street Name, Bldg. No., Apt. No., City, State, Zip

Temp Res. Foreign Nat.

Resident Tourist Student OtherCommuter Military Homeless Unk

Residence

Business Residence Business Residence

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25 PERSONS INTERVIEWED

PI-1 [REDACTED]

* DEPO SIGNED

PI-2 [REDACTED]

NY 10923 [REDACTED]

* DEPO SIGNED

PI-3 [REDACTED]

* VOLUNTARY STATEMENT TO "S.R.O."

PI-4 [REDACTED]

RECEPTIONIST/TYPIST (Depo Signed)

c/o NRHS 106 HAMMOND RD THIELS 942-3300

PI-5 [REDACTED]

NRHS SECURITY

c/o NRHS 106 HAMMOND RD THIELS 942-3300

Depo Signed

Total

10. Inquiries (Check all that apply)

DMV Warrant/Warrant Scofflaw
 Crim.History Stolen Property Other

11. NYSPIN Message No.

12.

82

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of

3

Page

13. Reporting Officer Signature (Include Rank)

14. ID No.

15. Supervisor's Signature (Include Rank)

16. ID No.

82

Page

of

3

Page

17. Case Status

Open Closed (If Closed, check box below) Unfounded
 Vict. Refused to Coop. Arrest Pros. Declined Warrant Advised
 CSI Juv. - No Custody Arrest - Juv. Offender Dead Etrad Declin Unknown

18. Status Date

12/16/04

19. Notified/TOT

D/SGT

16. Incident Type Disorderly Conduct.		17. Business Name		18. Weapons	
19. Incident Address (Street No., Street Name, Bldg. No., Apt. No.) 106 Hammond Rd				20. City, State, Zip (□ C □ T □ V) Thiells, NY 10984	
				21. Location Code BLD/601	
				23. No. of Victims 01	
				24. No. of Suspects 02	
				25. Victim also complainant <input type="checkbox"/> Y <input type="checkbox"/> N	
S1 See Supplement		26. Date of Birth 02/04/49		27. Age 55	
S2 See Supplement		28. Sex <input checked="" type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> U		29. Race <input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk.	
OT LeFever, Harry		30. Ethnic <input type="checkbox"/> Hispanic <input type="checkbox"/> Unk. <input checked="" type="checkbox"/> Non-Hispanic		31. Handicap <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		32. Residence Status <input type="checkbox"/> Resident <input type="checkbox"/> Tourist <input type="checkbox"/> Student <input type="checkbox"/> Other <input checked="" type="checkbox"/> Commuter <input type="checkbox"/> Military <input type="checkbox"/> Homeless <input type="checkbox"/> Unk		33. Residence Status <input type="checkbox"/> Temp. Res. - Foreign Nat. <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Tourist <input type="checkbox"/> Student <input type="checkbox"/> Other <input type="checkbox"/> Commuter <input type="checkbox"/> Military <input type="checkbox"/> Homeless <input type="checkbox"/> Unk	
34. Type/No TABLE O		35. Name (Last, First, Middle) [REDACTED]		36. Alias/Nickname/Maiden Name (Last, First, Middle) [REDACTED]	
37. Apparent Condition <input type="checkbox"/> Impaired Drugs <input type="checkbox"/> Mental Dis <input type="checkbox"/> Unk. <input type="checkbox"/> Impaired Alco <input type="checkbox"/> Inj / Ill <input checked="" type="checkbox"/> App Norm		38. Address (Street No., Street Name, Bldg. No., Apt. No., City, State, Zip) [REDACTED]		39. Phone No. (647) [REDACTED]	
40. Social Security No. [REDACTED]		41. Date of Birth [REDACTED]		42. Age 17	
43. Sex <input type="checkbox"/> M <input checked="" type="checkbox"/> F <input type="checkbox"/> U		44. Race <input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk.		45. Ethnic <input checked="" type="checkbox"/> Hispanic <input type="checkbox"/> Unk. <input type="checkbox"/> Non-Hispanic	
46. Height 5 ft 5 in. 5		47. Weight 150		48. Skin <input type="checkbox"/> Light <input type="checkbox"/> Dark <input type="checkbox"/> Unk. <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Other	
49. Weight 150		50. Hair BLK		51. Eyes BLK	
52. Glasses <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		53. Build <input type="checkbox"/> Small <input checked="" type="checkbox"/> Large <input checked="" type="checkbox"/> Medium		54. Employer/School N.R. H.S.	
55. Address 106 Hammond Rd.		56. Scars/ Marks /Tattoos (Describe)		57. Misc.	
58. Property (Describe)		59. Vehicle Status TABLE W		60. License Plate No Full <input type="checkbox"/> Partial <input type="checkbox"/>	
				61. State [REDACTED]	
				62. Exp. Yr. [REDACTED]	
				63. Plate Type [REDACTED]	
				64. Value [REDACTED]	
65. Veh. Yr. [REDACTED]		66. Make [REDACTED]		67. Model [REDACTED]	
68. Style [REDACTED]		69. VIN [REDACTED]		70. Color(s) [REDACTED]	
71. Towed By: To:		72. Vehicle Notes			
73. On The above date, Time, and location (S2) heard a rumor that (S1) was talking about her. (S2) went to confront (S1) in the hallway after being told by (S1) not to pursue this matter. (S2) decided to continue toward (S1) but was stopped by (S1) before reaching (S1). (S1) needed to restrain (S2) for approx. 10 mins. and had his eyeglasses broken and his right hand scratched while holding back (S2). (S1) & (S2) never had any physical contact. (S1) is not willing to pursue this matter and will handle it in house tomorrow.					

73. On the above date, Time, and location (S₂) heard a rumor that (S₁) was talking about her. (S₂) went to confront (S₁) in the hallway after being told by (Colvin) not to pursue this matter. (S₂) decided to continue toward (S₁) but was stopped by (Colvin) before reaching (S₁). (Colvin) needed to restrain (S₂) for approx. 10 mins. and had his eyeglasses broken and his right hand scratched while holding back (S₂). (S₁) & (S₂) never had any physical contact. (S₁) & (S₂) do not wish to pursue this matter and will handle it in house tomorrow (at) the school's Ass. Superintendent units on scene.

<p>79. Inquiries (Check all that apply)</p> <p><input type="checkbox"/> DMV <input type="checkbox"/> Warrant/Warrant <input type="checkbox"/> Scofflaw <input type="checkbox"/> Crim. History <input type="checkbox"/> Stolen Property <input type="checkbox"/> Other</p>				75. NYSPIN Message No.	76. Complaintant Signature	
<p>77. Reporting Officer Signature (Include Rank)</p> <p></p>				78. ID No.	79. Supervisor's Signature (Include Rank)	
						80. ID No. 55
<p>81. Status</p> <p><input type="checkbox"/> Open <input type="checkbox"/> Closed (If Closed, check box below)</p> <p><input type="checkbox"/> Vict. Refused to Coop. <input type="checkbox"/> Arrest <input type="checkbox"/> Bros. Declined <input type="checkbox"/> Unfounded</p> <p><input type="checkbox"/> CBI <input type="checkbox"/> Juv. - No Custody <input type="checkbox"/> Arrest - Juv. <input type="checkbox"/> Offender Dead <input type="checkbox"/> Warrant Advised</p> <p><input type="checkbox"/> Evid. <input type="checkbox"/> Offender - No Custody <input type="checkbox"/> Extrad. Declin. <input type="checkbox"/> Unknown</p>				82. Status Date	83. Notified 48Hr	
				2010-01-15	15	SPD SPATTA

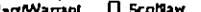
-08190-KMK Document 1-3 Filed
JUVENILE

5. Name (Last, First, Middle)		36. Alias/Nickname/Maiden Name (Last, First, Middle)				37. Apparent Condition		K.			
[REDACTED]		[REDACTED]				<input type="checkbox"/> Impaired Drugs <input type="checkbox"/> Mental Dis <input type="checkbox"/> Unk. <input type="checkbox"/> Impaired Alco <input type="checkbox"/> Inj / Ill <input checked="" type="checkbox"/> App Norm					
Street No. / Name / City / State / Zip		38. Phone No.				<input checked="" type="checkbox"/> Home <input type="checkbox"/> Work [REDACTED]		L.			
[REDACTED]		[REDACTED]				40. Social Security No.		[REDACTED]			
[REDACTED]		43. Sex		44. Race		45. Ethnic		46. Skin		47. Occupation	M.
<input type="checkbox"/> M <input checked="" type="checkbox"/> F <input type="checkbox"/> U		<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk.		<input type="checkbox"/> Hispanic <input type="checkbox"/> Unk. <input type="checkbox"/> Non-Hispanic		<input type="checkbox"/> Light <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Other		<input type="checkbox"/> Dark <input type="checkbox"/> Unk. <input type="checkbox"/> Other		STREETER	
49. Weight	50. Hair	51. Eyes	52. Glasses	53. Build	54. Employer/School	55. Address		N.			
110	Blk	Blue	<input type="checkbox"/> Yes <input type="checkbox"/> Contacts <input type="checkbox"/> No	<input type="checkbox"/> Small <input type="checkbox"/> Large <input checked="" type="checkbox"/> Medium	N. R. H. S.	106 HAMMOND RD					
56. Tattoos (Describe)											
57. Misc.											

JUVENILE

JUVENILE

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inquirers (Check all that apply) DMV <input type="checkbox"/> Wart/Warrant <input type="checkbox"/> Scotlaw Crim. History <input type="checkbox"/> Stolen Property <input type="checkbox"/> Other		11. NYSPIN Message No.	12.	B2. <u>2</u> Page <u>1</u> - <u>2</u> Pages
Reporting Officer Signature (Include Rank) 		14. ID No. <u>322</u>	15. Supervisor's Signature (Include Rank)	16. ID No.
Case Status Vict. Relieved to Cops.		<input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed (If Closed, check box below) <input type="checkbox"/> Arrested <input type="checkbox"/> Pros. Declined	<input type="checkbox"/> Unbounded <input type="checkbox"/> Warrant Advised <input type="checkbox"/> Searched <input type="checkbox"/> Seized	18. Status Date <u>31/16/05</u> 19. Notified TOT <u>SD SPATT</u>

Report Date: 3/17/05 10:00 AM Report Time: 10:00 Day: 11: Date: 12: Time: 13: Day: 14: Date: 15: Time: FRI Case 7:07-cv-08190-KMK Document 1-8 Filed 09/19/2007 Page 17 of 22

16. Incident Type: Criminal Mischief	17. Business Name: _____	18. Weapon(s): _____		
19. Incident Address (Street No., Street Name, Bldg. No., Apt. No.): 106 Hammond Rd		20. City, State, Zip (□ C □ T □ V): Thiells, NY		
		21. Location Code (Indicate Code): 444-6		
1. PL 145.00 1 A M 4th C CRIM MIS 4th	2. .	23. No. of Victims: 1		
2. .	3. .	24. No. of Suspects: 1		
25. Victim(s) Accompaniment: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N				
26. Offender(s) Accompaniment: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	E. _____			
27. Date of Birth: Mo/1 29 59 28. Age: 45 29. Sex: <input checked="" type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> U	30. Race: <input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk.	31. Ethnic: <input checked="" type="checkbox"/> Hispanic <input type="checkbox"/> Unk. <input type="checkbox"/> Non-Hispanic	32. Handicap: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	33. Residence Status: <input type="checkbox"/> Temp. Res. - Foreign Nat. <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Tourist <input type="checkbox"/> Student <input type="checkbox"/> Other <input type="checkbox"/> Commuter <input type="checkbox"/> Military <input type="checkbox"/> Homeless <input type="checkbox"/> Unk
34. Type/No: S TABLEO 35. Name (Last, First, Middle): [REDACTED]	36. Alias/Nickname/Maiden Name (Last, First, Middle): [REDACTED]		37. Apparent Condition: <input checked="" type="checkbox"/> Impaired Drugs <input type="checkbox"/> Mental Dis. <input type="checkbox"/> Unk. <input type="checkbox"/> Impaired Alco <input type="checkbox"/> Inj. / Ill. <input type="checkbox"/> App Norm	
38. Address (Street No., Street Name, Bldg. No., Apt. No., City, State, Zip): [REDACTED]		39. Phone No.: [REDACTED]		40. Social Security No.: [REDACTED]
41. Date of Birth: [REDACTED] 42. Age: 16 43. Sex: <input checked="" type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> U	44. Race: <input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk.	45. Ethnic: <input checked="" type="checkbox"/> Hispanic <input type="checkbox"/> Unk. <input type="checkbox"/> Non-Hispanic	46. Skin: <input type="checkbox"/> Light <input type="checkbox"/> Dark <input type="checkbox"/> Unk. <input type="checkbox"/> Medium <input type="checkbox"/> Other	47. Occupation: STUDENT
48. Height: 5'16 49. Weight: 155 50. Hair: BR 51. Eyes: BR	52. Glasses: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Contacts <input type="checkbox"/> No	53. Build: <input type="checkbox"/> Small <input type="checkbox"/> Large <input checked="" type="checkbox"/> Medium	54. Employer/School: NR H.S	55. Address: 106 Hammond Rd
56. Scar/ Marks/ Tattoos (Describe): left hand - FEB		57. Misc.: Cornrows		
<input checked="" type="checkbox"/> 60. License Plate No: TABLET TABLE U TABLE V	61. State: _____	62. Exp. Yr: _____	63. Plate Type: _____	64. Value: 1 MIRROR <input checked="" type="checkbox"/> Total
65. Veh. Yr: _____	66. Make: _____	67. Model: _____	68. Style: _____	69. VIN: _____
70. Color(s): _____	71. Towed By: _____ To: _____		72. Vehicle Notes: _____	
73. (CO) states that after a verbal argument w/ (OT); girlfriend (S) went into a bathroom @ N.R.H.S. and punched a mirror, damaging said mirror. Above (S) received several lacerations to his hand requiring stitches. Parent of (S) contacted and on scene. Parent of (S) RMA, stating he would personally take (S) to NYACK Hospital. MEDICATED SCENE. (S) released on scene w/ appearance ticket.				
74. Inquiries (Check all that apply): <input type="checkbox"/> DMV <input type="checkbox"/> Want/Warrant <input type="checkbox"/> Scofflaw <input type="checkbox"/> Other <input type="checkbox"/> Crim. History <input type="checkbox"/> Stolen Property		75. NYSPIN Message No.: _____	76. Complainant Signature: [Signature]	
77. Reporting Officer Signature (Include Rank): F.O.		78. ID No.: 303	79. Supervisor's Signature (Include Rank): [Signature]	
81. Status: <input checked="" type="checkbox"/> Open <input type="checkbox"/> Closed (If Closed, check box below) <input type="checkbox"/> Unfounded <input type="checkbox"/> Vict. Refused to Coop. <input type="checkbox"/> Arrest <input type="checkbox"/> Pros. Declined <input type="checkbox"/> Warrant Advised <input type="checkbox"/> CBI <input type="checkbox"/> Juv. - No Custody <input type="checkbox"/> Arrest - Juve. <input type="checkbox"/> Offender Dead <input type="checkbox"/> Extrad. Declin. <input type="checkbox"/> Unknown			82. Status Date: 3/17/05	83. Notified/TOT: 9 Pages: 9

1. Report Date	2. Date	3. Report Time	4. Day	5. Day	6. Day	7. Day	8. Day	9. Day	10. Day	11. Day	12. Day	13. Day	14. Day	15. Time							
Case 7:07-cv-00190-KMK Document 1-3 Filed 09/19/2007 Page 18 of 22																					
16. Incident Type		17. Business Name													18. Weapon(s)						
CRIMINAL TRESPASS - JUVENILE		NRHS													Knife						
19. Incident Address (Street No., Street Name, Bldg. No., Apt. No.)		20. City, State, Zip (□ C □ T □ V)													21. Location Code						
106 Hammond Rd		THIELE'S NY 10584													4415						
22. Sex		23. No. of Victims		24. No. of Suspects																	
M □ F U		1		1																	
25. Race		26. Victim also complainant (□ Y □ N)		27. Date of Birth		28. Age		29. Sex		30. Race		31. Ethnic		32. Handicap		33. Residence Status					
White □ Black □ Other Indian □ Asian □ Unk.		□ Y □ N		Mo. Day		Yr.		M □ F U		White □ Black □ Other Indian □ Asian □ Unk.		Hispanic □ Unk. Non-Hispanic		Yes □ No		Temp. Res. - Foreign Nat. Resident □ Tourist □ Student □ Other Commuter □ Military □ Homeless □ Unk.					
34. Type No		35. Name (Last, First, Middle)		36. Alias/Nickname/Maiden Name (Last, First, Middle)		37. Apparent Condition															
T-B-10		Juvenile				□ Impaired Drugs □ Mental Dis □ Unk. □ Impaired Alco □ Inj/ Ill □ App Norm															
38. Address (Street No., Street Name, Bldg. No., Apt. No., City, State, Zip)		39. Phone No.		40. Social Security No.																	
Mo. Day		Yr.		□ Home □ Work																	
41. Date of Birth		42. Age		43. Sex		44. Race		45. Ethnic		46. Skin		47. Occupation									
Mo. Day		Yr.		15		White □ Black □ Other Indian □ Asian □ Unk.		Hispanic □ Unk. Non-Hispanic		Light □ Dark □ Unk. Medium □ Other		TAKE P									
48. Height		49. Weight		50. Hair		51. Eyes		52. Glasses		53. Build		54. Employer/Address		55. Address							
5'6 1/2		100		BLK		BROWN		Yes □ Contacts No		Small □ Large Medium		HOME INSTRUCT.		—							
56. Scars/ Marks/Tattoos (Describe)		57. Misc.		58. Signature		59. Vehicle Status		60. License Plate No		61. State		62. Exp. Yr.		63. Plate Type		64. Value					
TABLES		TABLET		TABLE U		TABLE V		Full □ Partial □		Partial		65. Veh. Yr.		66. Make		67. Model		68. Style		69. VIN	
70. Color(s)		71. Towed By:		72. Vehicle Notes		73. P.O. SPATTA, SRO AT NORTH ROCKLAND H.S. WAS MADE AWARE BY SCHOOL SECURITY THAT ABOVE JUVENILE WAS NOT A REGISTERED STUDENT AT N.R.H.S AND WAS SITTING IN THE CAFETERIA. WHEN CONFRONTED BY SRO JUVENILE DID REFUSE TO GIVE HIS NAME AND DATE OF BIRTH. JUVENILE WAS THEN FOUND TO BE IN POSSESSION OF A SHARP BLADE GRAVITY KNIFE. ONCE JUVENILE'S NAME AND DOB. WERE CONFIRMED, Y.O. AKERS WAS CALLED AND DID RESPOND TO NRHS. JUVENILE WAS THEN TAKEN BY P.O. AKERS & SGT FIGUEROA TO H.T.P.D		74. Inquiries (Check all that apply)		75. NYSPIN Message No.		76. Complaint Signature									
□ DMV		□ Want/Warrant		□ Scofflaw		□ Stolen Property		□ Other													
□ Crim. History																					
77. Reporting Officer Signature (Include Rank)		78. ID No.		79. Supervisor's Signature (Include Rank)		80. ID No.															
P.O. SPATTA		304		Sgt. J. L. CONNELL		#311															
B1. Status		B2. Open (If Closed, check box below)		B3. Closed (If Closed, check box below)		B4. Unfounded		B5. Warrant Advised		B6. Arrest		B7. Pros. Declined		B8. Offender Dead		B9. Extrad. Declin.		B10. Unknown			
□ Vict. Refused to Coop.		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
□ CBI		□ Juv. No Custody		□ Arrest-Juv.		□ Offender Dead		□ Extrad. Declin.		□ Unknown		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.			
B11. Status		B12. Open (If Closed, check box below)		B13. Closed (If Closed, check box below)		B14. Unfounded		B15. Warrant Advised		B16. Arrest		B17. Pros. Declined		B18. Offender Dead		B19. Extrad. Declin.		B20. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B21. Status		B22. Open (If Closed, check box below)		B23. Closed (If Closed, check box below)		B24. Unfounded		B25. Warrant Advised		B26. Arrest		B27. Pros. Declined		B28. Offender Dead		B29. Extrad. Declin.		B30. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B31. Status		B32. Open (If Closed, check box below)		B33. Closed (If Closed, check box below)		B34. Unfounded		B35. Warrant Advised		B36. Arrest		B37. Pros. Declined		B38. Offender Dead		B39. Extrad. Declin.		B40. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B41. Status		B42. Open (If Closed, check box below)		B43. Closed (If Closed, check box below)		B44. Unfounded		B45. Warrant Advised		B46. Arrest		B47. Pros. Declined		B48. Offender Dead		B49. Extrad. Declin.		B50. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B51. Status		B52. Open (If Closed, check box below)		B53. Closed (If Closed, check box below)		B54. Unfounded		B55. Warrant Advised		B56. Arrest		B57. Pros. Declined		B58. Offender Dead		B59. Extrad. Declin.		B60. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B61. Status		B62. Open (If Closed, check box below)		B63. Closed (If Closed, check box below)		B64. Unfounded		B65. Warrant Advised		B66. Arrest		B67. Pros. Declined		B68. Offender Dead		B69. Extrad. Declin.		B70. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B71. Status		B72. Open (If Closed, check box below)		B73. Closed (If Closed, check box below)		B74. Unfounded		B75. Warrant Advised		B76. Arrest		B77. Pros. Declined		B78. Offender Dead		B79. Extrad. Declin.		B80. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B81. Status		B82. Open (If Closed, check box below)		B83. Closed (If Closed, check box below)		B84. Unfounded		B85. Warrant Advised		B86. Arrest		B87. Pros. Declined		B88. Offender Dead		B89. Extrad. Declin.		B90. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B91. Status		B92. Open (If Closed, check box below)		B93. Closed (If Closed, check box below)		B94. Unfounded		B95. Warrant Advised		B96. Arrest		B97. Pros. Declined		B98. Offender Dead		B99. Extrad. Declin.		B100. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B101. Status		B102. Open (If Closed, check box below)		B103. Closed (If Closed, check box below)		B104. Unfounded		B105. Warrant Advised		B106. Arrest		B107. Pros. Declined		B108. Offender Dead		B109. Extrad. Declin.		B110. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B111. Status		B112. Open (If Closed, check box below)		B113. Closed (If Closed, check box below)		B114. Unfounded		B115. Warrant Advised		B116. Arrest		B117. Pros. Declined		B118. Offender Dead		B119. Extrad. Declin.		B120. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B121. Status		B122. Open (If Closed, check box below)		B123. Closed (If Closed, check box below)		B124. Unfounded		B125. Warrant Advised		B126. Arrest		B127. Pros. Declined		B128. Offender Dead		B129. Extrad. Declin.		B130. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B131. Status		B132. Open (If Closed, check box below)		B133. Closed (If Closed, check box below)		B134. Unfounded		B135. Warrant Advised		B136. Arrest		B137. Pros. Declined		B138. Offender Dead		B139. Extrad. Declin.		B140. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B141. Status		B142. Open (If Closed, check box below)		B143. Closed (If Closed, check box below)		B144. Unfounded		B145. Warrant Advised		B146. Arrest		B147. Pros. Declined		B148. Offender Dead		B149. Extrad. Declin.		B150. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B151. Status		B152. Open (If Closed, check box below)		B153. Closed (If Closed, check box below)		B154. Unfounded		B155. Warrant Advised		B156. Arrest		B157. Pros. Declined		B158. Offender Dead		B159. Extrad. Declin.		B160. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B161. Status		B162. Open (If Closed, check box below)		B163. Closed (If Closed, check box below)		B164. Unfounded		B165. Warrant Advised		B166. Arrest		B167. Pros. Declined		B168. Offender Dead		B169. Extrad. Declin.		B170. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B171. Status		B172. Open (If Closed, check box below)		B173. Closed (If Closed, check box below)		B174. Unfounded		B175. Warrant Advised		B176. Arrest		B177. Pros. Declined		B178. Offender Dead		B179. Extrad. Declin.		B180. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B181. Status		B182. Open (If Closed, check box below)		B183. Closed (If Closed, check box below)		B184. Unfounded		B185. Warrant Advised		B186. Arrest		B187. Pros. Declined		B188. Offender Dead		B189. Extrad. Declin.		B190. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B191. Status		B192. Open (If Closed, check box below)		B193. Closed (If Closed, check box below)		B194. Unfounded		B195. Warrant Advised		B196. Arrest		B197. Pros. Declined		B198. Offender Dead		B199. Extrad. Declin.		B200. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B201. Status		B202. Open (If Closed, check box below)		B203. Closed (If Closed, check box below)		B204. Unfounded		B205. Warrant Advised		B206. Arrest		B207. Pros. Declined		B208. Offender Dead		B209. Extrad. Declin.		B210. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B211. Status		B212. Open (If Closed, check box below)		B213. Closed (If Closed, check box below)		B214. Unfounded		B215. Warrant Advised		B216. Arrest		B217. Pros. Declined		B218. Offender Dead		B219. Extrad. Declin.		B220. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B221. Status		B222. Open (If Closed, check box below)		B223. Closed (If Closed, check box below)		B224. Unfounded		B225. Warrant Advised		B226. Arrest		B227. Pros. Declined		B228. Offender Dead		B229. Extrad. Declin.		B230. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B231. Status		B232. Open (If Closed, check box below)		B233. Closed (If Closed, check box below)		B234. Unfounded		B235. Warrant Advised		B236. Arrest		B237. Pros. Declined		B238. Offender Dead		B239. Extrad. Declin.		B240. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B241. Status		B242. Open (If Closed, check box below)		B243. Closed (If Closed, check box below)		B244. Unfounded		B245. Warrant Advised		B246. Arrest		B247. Pros. Declined		B248. Offender Dead		B249. Extrad. Declin.		B250. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B251. Status		B252. Open (If Closed, check box below)		B253. Closed (If Closed, check box below)		B254. Unfounded		B255. Warrant Advised		B256. Arrest		B257. Pros. Declined		B258. Offender Dead		B259. Extrad. Declin.		B260. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B261. Status		B262. Open (If Closed, check box below)		B263. Closed (If Closed, check box below)		B264. Unfounded		B265. Warrant Advised		B266. Arrest		B267. Pros. Declined		B268. Offender Dead		B269. Extrad. Declin.		B270. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B271. Status		B272. Open (If Closed, check box below)		B273. Closed (If Closed, check box below)		B274. Unfounded		B275. Warrant Advised		B276. Arrest		B277. Pros. Declined		B278. Offender Dead		B279. Extrad. Declin.		B280. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B281. Status		B282. Open (If Closed, check box below)		B283. Closed (If Closed, check box below)		B284. Unfounded		B285. Warrant Advised		B286. Arrest		B287. Pros. Declined		B288. Offender Dead		B289. Extrad. Declin.		B290. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B291. Status		B292. Open (If Closed, check box below)		B293. Closed (If Closed, check box below)		B294. Unfounded		B295. Warrant Advised		B296. Arrest		B297. Pros. Declined		B298. Offender Dead		B299. Extrad. Declin.		B300. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B301. Status		B302. Open (If Closed, check box below)		B303. Closed (If Closed, check box below)		B304. Unfounded		B305. Warrant Advised		B306. Arrest		B307. Pros. Declined		B308. Offender Dead		B309. Extrad. Declin.		B310. Unknown			
□ CBI		□ Open		□ Closed		□ Unfounded		□ Warrant Advised		□ Arrest		□ Pros. Declined		□ Offender Dead		□ Extrad. Declin.		□ Unknown			
B311. Status		B312. Open (If Closed, check box below)		B313. Closed (If Closed, check box below)		B314. Unfounded		B315. Warrant Advised		B316. Arrest		B317. Pros. Declined									

10. Inquiries (Check all that apply)

<input type="checkbox"/> DMV	<input type="checkbox"/> Want/Warrant	<input type="checkbox"/> Scofflaw
<input type="checkbox"/> Crim. History	<input type="checkbox"/> Stolen Property	<input type="checkbox"/> Other

11. NYSPIN Message No.

12.

13. Reporting Officer Signature (Include Rank)

14. ID No.

304

15. Supervisor's Signature (Include Rank)

16. ID No.

20.



Page

of

2

Pages

17. Case Status Open Closed (If Closed; check box below) Unfounded
 Vict. Refused to Coop. Arrest Pros. Declined Warrant Advised
 CBI Juv. - No Custody Arrest-Juv. Offender Dead Extrad. Declin. Unknown18. Status Date
Mo. Day

5 9

19. Certified/TOT

Y C

B

use cover
sheet

INCIDENT	Report Date	6/8/05	9. Report Time	1700	10. Day	11. Date	12. Time	13. Day	14. Date	15. Time		
	Case No.	6	10. Date	6/8/05	11. Day	1200	12. Time	13. Day	14. Date	15. Time		
	16. Incident Type	CRIMINAL MISCHIEF				NORTH ROCKLAND HIGH SCHOOL				17. Business Name		
	18. Weapons									19. Location Code		
	20. City, State, Zip	THOMASVILLE NY 10984								21. Location Code		
	22. Off. No.	LAW	SECTION	SUB	CL	CAT	DEG	ATT	NAME OF OFFENSE		CTS	
	1	PL	145.00	1	A	M	4	C	CRIMINAL MISCHIEF 4		1	
	2											
	3											
	25. Person Type: CO = Complainant OT = Other PI = Person Interviewed PR = Person Reporting WI = Witness NJ = Not Interviewed VI = Victim									26. Victim also complainant	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
TYPE/NO		NAME (LAST, FIRST, MIDDLE, TITLE)		Date of Birth	STREET NO., STREET NAME, BLDG. NO., APT. NO., CITY, STATE, ZIP				Telephone No.			
CO		OSBERG KEN		3/20/44	106 HAMMOND RD THOMASVILLE NY 10984				6948-5300			
									RESIDENCE			
									BUSINESS			
									RESIDENCE			
									BUSINESS			
									RESIDENCE			
									BUSINESS			
									RESIDENCE			
ASSOCIATED PERSONS	27. Date of Birth	28. Age	29. Sex	30. Race	31. Ethnic	32. Handicap	33. Residence Status	Temp. Res. - Foreign Nat.				
			<input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> U	<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk.	<input type="checkbox"/> Hispanic <input type="checkbox"/> Unk. <input type="checkbox"/> Non-Hispanic	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Resident <input type="checkbox"/> Commuter <input type="checkbox"/> Military	<input type="checkbox"/> Tourist <input type="checkbox"/> Student <input type="checkbox"/> Other <input type="checkbox"/> Homeless <input type="checkbox"/> Unk.				
	34. Type/No	35. Name (Last, First, Middle)			36. Alias/Nickname/Maiden Name (Last, First, Middle)				37. Apparent Condition			
	CO	OSBERG KEN			—				<input type="checkbox"/> Impaired Drugs <input type="checkbox"/> Mental Dis. <input type="checkbox"/> Unk. <input type="checkbox"/> Impaired Alco <input type="checkbox"/> Inj / Ill <input checked="" type="checkbox"/> App Norm			
	38. Address (Street No., Street Name, Bldg. No., Apt. No., City, State, Zip)					39. Phone No.		<input type="checkbox"/> Home <input type="checkbox"/> Work		40. Social Security No.		
	41. Date of Birth	42. Age	43. Sex	44. Race	45. Ethnic	46. Skin	47. Occupation					
		16	<input type="checkbox"/> M <input checked="" type="checkbox"/> F <input type="checkbox"/> U	<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk.	<input checked="" type="checkbox"/> Hispanic <input type="checkbox"/> Unk. <input type="checkbox"/> Non-Hispanic	<input type="checkbox"/> Light <input type="checkbox"/> Dark <input type="checkbox"/> Unk. <input type="checkbox"/> Medium <input type="checkbox"/> Other	—	TABLE P				
	48. Height	49. Weight	50. Hair	51. Eyes	52. Glasses	53. Build	54. Employer/School	55. Address				
	5'5	110	BLK	BLK	<input type="checkbox"/> Yes <input type="checkbox"/> Contacts <input type="checkbox"/> No	<input type="checkbox"/> Small <input type="checkbox"/> Large <input type="checkbox"/> Medium	NRHS	106 HAMMOND RD				
	56. Scars/Marks/Tattoos (Describe)					57. Misc	A5#05-311					
PROPERTY	58. Victim or Suspect No.	Property Status	Property Type	Quantity/Measure	Make or Drug Type	Model	Serial No.	Description			Value	
	—	TABLES	TABLE	TABLE U	TABLE	—	—					
	59. Vehicle Status	60. License Plate No		Full <input type="checkbox"/> Partial <input type="checkbox"/>	61. State	62. Exp. Yr.	63. Plate Type	64. Value	Total			
	65. Veh. Yr.	66. Make		67. Model	68. Style	69. VIN.						
	70. Color(s)	71. Towed By:		72. Vehicle Notes								
	73. (CO) STATES AT THE ABOVE DATE AND TIME (S) BECAME ANGRY AFTER HE ATTEMPTED TO SPEAK WITH HER. SHE THEN WALKED INTO THE COORDINATORS OFFICE AND FORCEFULLY OPENED THE DOOR. SAID DOOR DAMAGED THE OFFICE WALL. THE OPENING OF THE DOOR CAUSED A SMALL HOLE AND A LARGE CRACK. (CO) CALLED THE POLICE AND (S) WAS ARRESTED WITHOUT INCIDENT. (S) GRANDMOTHER'S PHONE # 55-1125-MRS. M											
	NARRATIVE											
ADMINISTRATIVE	74. Inquiries (Check all that apply)				75. NYSPIN Message No.				76. Complainant Signature			
	<input type="checkbox"/> DMV	<input type="checkbox"/> Warrant/Warrant	<input type="checkbox"/> Scofflaw	<input type="checkbox"/> Other					<i>John Oster</i>			
	<input type="checkbox"/> Crim. History	<input type="checkbox"/> Stolen Property										
	77. Reporting Officer Signature (Include Rank)				78. ID No.	79. Supervisor's Signature (Include Rank)				80. ID No.		
	<i>P.O. Thomas J. Oster</i>				219	<i>Sgt. John Oster</i>				55		

DCJS-3205 (10/03)

*FALSE STATEMENTS ARE PUNISHABLE AS A CRIME, PURSUANT TO THE NEW YORK STATE PENAL LAW

Mon 12/21/05 0830

16. Incident Type Case 7:07-cr-08190-KMK

17. Business Name N R CSD

18. Incident Address (Street No., Street Name, Bldg. No., Apt. No.)

106 Hammond Rd

19. Date, Month, Year

20. City, State, Zip (C) (P) (V)

21. Location Code

22. Victim(s) (Check all that apply)

23. No. of Victims

24. No. of Suspects

25. Victim also complainant (S)Y (N)

26. Victim also complainant (S)Y (N)

27. Date of Birth

28. Age

29. Sex

30. Race

31. Ethnic

32. Handicap

33. Residence Status

34. Type/No

35. Name (Last, First, Middle)

36. Alias/Nickname/Maiden Name (Last, First, Middle)

37. Apparent Condition

38. Address (Street No., Street Name, Bldg. No., Apt. No., City, State, Zip)

39. Phone No.

40. Social Security No.

41. Date of Birth

42. Age

43. Sex

44. Race

45. Ethnic

46. Skin

47. Occupation

48. Height

49. Weight

50. Hair

51. Eyes

52. Glasses

53. Build

54. Employer/School

55. Address

56. Scars/ Marks /Tattoos (Describe)

57. Misc.

58. TABLE S

59. TABLE T

60. TABLE U

61. TABLE V

62. TABLE W

63. TABLE X

64. TABLE Y

65. TABLE Z

66. TABLE AA

67. TABLE BB

68. TABLE CC

69. TABLE DD

70. TABLE EE

71. TABLE FF

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